## Congress of the United States Washington, DC 20515

July 22, 2021

The Honorable Denis McDonough Secretary Department of Veterans Affairs 810 Vermont Avenue, NW Washington, D.C. 20420

Dear Secretary McDonough:

Thank you for your recent call informing me of the conclusion of the Department of Veterans Affairs (VA) strategic review of the Electronic Health Record Modernization (EHRM) project. I believe this review was urgently needed to diagnose and identify solutions for the many issues and concerns coming into my office from the Mann-Grandstaff VA Medical Center. I'm encouraged by the findings and the tentative action plans put forward in the final report. However, I am eager to hear more details from your team about how these plans will translate into tangible improvements. Our nation's veterans deserve gold-standard, timely care, and the new electronic health record should enable, not hinder this goal. For this reason, improving the system must remain a priority.

I was able to gather some helpful information from your testimony to the Senate Committee on Veterans Affairs on July 14th and your team's testimony to the House Committee on Veterans' Affairs on July 21st. However, I still have many questions. I respectfully request some clarity on the following issues regarding intended improvements to the electronic health record moving forward:

- 1. One issue that came up repeatedly in both hearings was a lack of effective communication between the VA and Cerner, especially on-the-ground in Eastern Washington. I have seen this myself with VA employees having to go through my office to report issues to make sure they are passed on to Cerner. What steps are being taken to streamline the communications process between VA and Cerner, particularly when it comes to reporting issues with the EHRM rollout at Mann-Grandstaff?
- 2. You stated that employees in our Veterans Integrated Service Network (VISN), as well as the central office were misreporting EHRM data to the Office of Inspector General (OIG), which made it hard to get an accurate picture of the situation at Mann-Grandstaff. What is being done to identify the responsible parties and hold them accountable?
- 3. What metrics are the VA using to track timeliness of care for veterans at Mann-Grandstaff? Does the EHRM support VA's ability to track these metrics?
- 4. How are you ensuring that Congress and the OIG are now being given accurate data?
- 5. It was discussed that the VA Office of Electronic Health Record Modernization misled Congress about the project's cost estimates in nine different legally mandated reports. Estimated costs for physical and technology infrastructure upgrades at a variety of

- medical centers totaling as much as \$5 billion were not reported, putting the total project's costs north of \$21 billion. Who was responsible for this inaccurate estimate, were any officials in our VISN involved, and what have you been able to determine about the reason for the inaccurate estimate?
- 6. Will you be conducting a formal investigation, such as an administrative investigation board, about misstating or withholding such information from the OIG or Congress?
- 7. What steps are being taken to stop the project's rapidly ballooning cost?
- 8. The Department of Defense had a variety of lessons learned from their own electronic health record implementation project, especially regarding the quality of training. Yet it seems Mann-Grandstaff experienced the same training weaknesses as military treatment facilities in Washington several years earlier. Why weren't those lessons studied, and the findings integrated into the VA's EHRM project to avoid the exact same mistakes that have led to the challenges we are seeing now?

Thank you for your personal engagement and commitment to improving performance in this important project. I look forward to continuing to work with you to ensure that EHRM is done right and improves the lives of our nation's veterans.

Sincerely,

Cathy McMorris Rodgers Member of Congress